

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Trimble et al.

Title: SECURITY SYSTEM FOR A
MODULAR SYSTEM IN A
VEHICLE

Appl. No.: To be determined

Filing Date: To be determined

Examiner: To be determined

Art Unit: To be determined

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.	
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(Express Mail Label Number)	(Date of Deposit)
Carolyn Simpson	
(Printed Name)	
	
(Signature)	

UTILITY PATENT APPLICATION
TRANSMITTAL

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

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Enclosed are:

- [X] Specification, Claim(s), and Abstract (29 pages).
- [X] Informal drawings (11 sheets, Figures 1, 2A, 2B, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18).
- [X] Declaration and Power of Attorney (7 pages).
- [X] Assignment of the invention to Johnson Controls Technology Company.
- [X] Assignment Recordation Cover Sheet.
- [X] Check in the amount of \$40.00 for Assignment recordation.
- [X] Application Data Sheet (37 CFR 1.76).
- [] Claim for Convention Priority.

The filing fee is calculated below:

	Claims as Filed		Included in Basic Fee		Extra Claims		Rate		Fee Totals
Basic Fee							\$770.00		\$770.00
Total	28	-	20	=	8	x	\$18.00	=	\$144.00
Claims:									
Independ	3	-	3	=	0	x	\$86.00	=	\$0.00
ents:									
If any Multiple Dependent Claim(s) present:						+	\$290.00	=	\$0.00
							SUBTOTAL:	=	\$914.00
[]							Small Entity Fees Apply (subtract 1/2 of above):	=	\$0.00
							TOTAL FILING FEE:	=	\$914.00

- [X] A check in the amount of \$914.00 to cover the filing fee is enclosed.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date OCTOBER 27, 2003

By



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